



In the United States Patent and Trademark Office

Before the Board of Patent Appeals

This application has been made special.

Appn. Number: 09/832,440 Appn. Filed: 2001 April 11

Applicant: Steve Morsa Examiner: Jonathan Ouellette Art Group: 3629

Title: Method and Apparatus for the Furnishing of Benefits Information and Benefits

Applicant Interview Summary

Applicant acknowledges receipt of Examiner's Interview Summary; which was included with the most recent (07/17/2007 mail date) Office Action.

Date of Telephonic Interview: 19 June 2007. Claims discussed: All independent.

Identification of the (non-prior art) "press release" exhibit discussed: PMA.

Agreement with respect to the claims was not reached.

Substance of Interview: *Applicant and Examiner discussed PMA. Examiner explained his stance on the claimed subject matter and how he believed PMA read on the subject matter. Applicant explained why PMA was in fact neither valid prior art nor enabling, and therefore could not read on the subject matter; and, accordingly; how it could neither anticipate nor render obvious any of Applicant's claims.*

Further, Applicant does not agree with and specifically disclaims Examiner's contention and statements that "sited prior art" was discussed; as PMA is not valid prior art.

Applicant/Appellant Appeal Brief

In 63 Pages; inclusive of Claims & Appendices; exclusive of Exhibits

This is in response to Examiner's Final Action mailed 07/17/2007.

Express Mailing Certification

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Steve Morsa

Steve Morsa

(1) **Real party in interest:** Applicant/Appellant; Steve Morsa

(2) **Related appeals and interferences:** None

(3) **Status of claims:** Claims 1-180 have been cancelled and claims 181-272 have been added. Claims 181-272 are pending in the application. Claim 269 has been allowed. Claims 182, 185, 204, 207, 226, 229, 248, and 251 are considered allowable by Examiner if rewritten to independent form.

Please note that though claims 181, 183, 184, 186-203, 205, 206, 208-225, 227, 228, 230-247, 249, 250, 252-268, and 270-272 have been indicated as having been rejected in the 07/17/2007 mail date OA (hereinafter, "OA") Summary, that; as per Examiner's paragraphs # 43, 45, and 46 on pages 10-11 of said OA; claims 183, 186, 187, 205, 208, 209, 227, 230, 231, 249, 252, and 253 have in fact been deemed allowable if rewritten in independent form.

Accordingly, the claims which have apparently been rejected by Examiner (Applicant requests notification and an opportunity to respond should such not be the case); and which are being appealed by Applicant; are **181, 184, 188-203, 206, 210-225, 228, 232-247, 250, 254-268, and 270-272**.

(4) **Status of amendments:** None.

(5) **Summary of claimed subject matter:** Per 41.37(c)(1), unrepresented/ pro se inventor/appellant is exempt.

(6) **Grounds of rejection to be reviewed on appeal:** Per 41.37(c)(1), unrepresented/ pro se inventor/appellant is exempt.

(7) **Argument:**

Applicant respectfully submits the following:

Grouping of Claims

1. For purposes of this appeal, the claims should be grouped as follows:
 - A) 181, 184, 188-203, 206, 210-224 are firstly patentably distinct as they are directed to and teach benefit matching for human beings. These claims are argued separately and do not stand or fall together.
 - B) 225, 228, 232-247, 250, 254-268 are firstly patentably distinct as they are directed to and teach benefit matching for businesses, governments, educational institutions, non-profit organizations (i.e. non-human entities). These claims are argued separately and do not stand or fall together.
 - C) 270-272 are firstly patentably distinct as they are directed to and teach benefit matching for all entity types. These claims are argued separately and do not stand or fall together.

Specification

2. Regarding Examiner's OA #2 on p.2; without addressing or taking a position on whether or not amendment (RCE) filed 5/22/2006 does or does not introduce new matter into the disclosure; Applicant nevertheless hereby agrees to cancel those/that part/s of the specification in said amendment which Applicant believes that Examiner believes to be and/or contain new matter.

Applicant accordingly kindly requests that the appropriate department/ division of the PTO institute the reversion of the following sections of the application to their originally-filed (4/11/2001) verbiage: Title, Abstract, Technical Field, Background of the Invention, Detailed Description including Example. *Thank you.*

Claim Objections

3. Regarding #4 on p. 2 of OA, Applicant has made the Examiner-requested misnumbering and typo corrections; with the enclosed Claims Appendix containing a complete set of all pending claims of the instant invention, incorporating said corrections. Therefore, 37 CFR 1.126 is not at issue here, as; since the 5/22/2006 RCE/Amendment; no claims have been cancelled and no new claims have been presented.

Applicant notes that this latest OA appears to not have a number “5” (p.2-3).

Applicant requests that Examiner notify applicant whether or not there is a number 5, and if so, what it is; so that applicant may properly address it.

4. Regarding #6 and #7 of p. 3 of OA, as applicant continues to maintain that all remaining claims should for the many reasons cited be allowed, no action is being taken by applicant on these items in this brief.

Invalid Subject Matter: All Claims Allowable

5. Applicant is submitting with this brief a previously noted, two page press release (Evidence Appendix; Exhibit A) which reveals that—contrary to the Examiner relied on, allegedly-dated 9/28/1999 PMA press release—HelpWorks Web Edition was actually not disclosed (publicly posted) nor available until on or about the April 24th, 2001 date of applicants-supplied press release; over a full year *after* applicants 4/12/2000 priority date.

Inasmuch as *both* alleged press releases are sourced from Business Wire via Dialog; the same exact services relied upon by Examiner; there is an obvious serious question of just when Web Edition was publicly disclosed.

Actual, real, operating, and obviously well-respected (from the positive comments [per press release] of their customers; including Minnesota and New Jersey government agencies) companies like Peter Martin wouldn’t dare claim to introduce/launch new products and/or services at different times; and further much less so over 1½ years apart (9/28/1999 vs 4/24/2001).

Irrespective of Examiner stated (OA #49, p. 11) “different forms” of the PMA press release, the time-critical fact remains that the brand new HelpWorks Web Edition service obviously and most certainly *can’t* be brand new . . . twice.

In addition, the following applicable sections of Business Wire's Terms of Use (TOU); taken directly from the Business Wire website on 4/11/2007; alerts users to the risks and dangers of, and the inherent questionable accuracy and reliability of, its very own data:

You agree that use of the Site is entirely at your own risk. Except as specifically provided in this agreement, the site and materials on the site are provided as is, without warranties or conditions of any kind, either express or implied, including, without limitation, the implied warranties of merchantability, fitness for a particular purpose, or non-infringement. Business Wire does not make any representations or warranties that the Site or materials on the Site or products and services purchased at or through the Site will meet your requirements or expectations, or that the operation of the Site will be uninterrupted, timely, secure or error-free. Some jurisdictions do not allow the exclusion of certain warranties, so some or all of the above exclusions may not apply to you.

You agree that Business Wire will not be held liable for any improper or incorrect use of the Site or the materials on the Site and assumes no responsibility for any user's activities on the Site or for the inaccuracy of any content on the Site. In no event will Business Wire be liable for any direct, indirect, incidental, special, exemplary or consequential damages, including, without limitation, procurement of substitute goods or services, loss of use, data or profits, or business interruption, arising in any way out of the use of (or inability to use) the Site or the materials on the Site or the inaccuracy of any content on the Site, however caused, under any theory of liability. This disclaimer of liability applies to any damages or injury under any cause of action, including, without limitation, those caused by any failure of performance, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus or bug, communication line failure, theft, destruction or alteration of or unauthorized access to the Site or materials on the Site. Some jurisdictions do not allow the exclusion of liability for incidental or consequential damages, so some or all of the above exclusions or limitations may not apply to you. [emphasis added]

6. Furthermore, as also previously noted (Evidence Appendix; Exhibit B), the USPTO office itself (trademark # 76173340; since abandoned) reveals that even the Peter Martin Company's own stated first use (and first use in commerce) of HelpWorks Web Edition wasn't until 6/30/2000; again, *after* applicant's 4/12/2000 priority date.
7. Therefore, given the absolute criticality of establishing and confirming unquestioned dates and content for all purported, alleged prior art [which duty Examiner is charged

with; not Applicant]; and the fact that such date and content certainty for the public disclosure of HelpWorks Web Edition is clearly and obviously not present here; it is well settled that arguments relying on such uncertain matter are rendered moot.

Accordingly, all claims should for this reason alone be allowed; with the alleged PMA press release, because it is not a bona fide reference; not qualifying to be included in a/the *Notice of References Cited*.

Non Enabling Subject Matter: All Claims Allowable

It is well settled that the scope of the prior art cannot extend beyond its disclosure.

"In determining that quantum of prior art disclosure which is necessary to declare an applicant's invention 'not novel' or 'anticipated' within section 102, the stated test is whether a reference contains an 'enabling disclosure'" In re Hoeksema, 399 F.2d 269, 158 USPQ 596 (CCPA 1968).

8. The following is a quotation of the appropriate paragraph of 35 U.S.C. 112 which forms one of a number of strong basis' for the alleged PMA press release being non-enabling subject matter:

"The specification (here, alleged prior art) shall contain a written description of the invention (here, HelpWorks Web Edition), and of the manner and process of making and using it, in such full, clear, and concise and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same" [parentheses added]

Thus, even if the alleged PMA press release *were* date and content accurate; which applicant vehemently contends is clearly not the case; it would *still* not be a bona fide reference/ publication/ prior art/ enabling disclosure, for, as is the case with the large majority if not all press releases; the information PMA supplies is clearly and obviously insufficient for the ordinarily skilled artisan in the pertinent art to create/ build and operate the instant invention without undue experimentation.

From PMA, what was HelpWorks Web Edition's [not HelpWorks; see below] structure and structural components and features—*specifically*? How were these

structural components and features integrated with each other; and within the system as a whole—*specifically*? It’s elements, steps, processes—*specifically*? What were its operational and functional features and how did they operate—and operate together—*specifically*?

The alleged PMA press release doesn’t say. Indeed, only with considerable and extensive experimentation—over who knows how many months (years?) of time—could the ordinarily skilled artisan even hope to come up with the instant invention from what little this alleged press release discloses—or even would reasonably suggest—to the ordinarily skilled artisan.

Considered another way, how; by any stretch of the imagination; would the *only 309 words* alleged PMA be deemed by the PTO to be anywhere near sufficient to meet the enabling disclosure requirements for a patent? Could a “112” rejection on such a submission be any more obvious or unassailable—or more quickly and justifiably issued—to any applicant foolish (or misinformed) enough to submit such a “disclosure” for a supposed invention?

In fact, the case for the non-enablement of PMA *is even further more starkly obvious* upon a careful, paragraph-by-paragraph examination of PMA. Specifically, note that; of the six paragraphs [numbered 1-6 by Examiner]; only *two* paragraphs (#4 and 5), *are even addressed and directed to the construction & operation* (such as it is) of *HelpWorks Web Edition*.

Paragraph one states only that HelpWorks, “... *is now Web enabled*” [note that PMA does not indicate; and no other evidence is offered to support; that the Web Edition was constructed and/or operated in the same; or even a similar, or even related, manner to the not web enabled HelpWorks].

Paragraph two; only that HelpWorks Web Edition was (supposedly; no evidence supplied in support of such) launched at some conference; and the Government's migration to e-commerce.

Paragraph three is addressed to; and reveals capability of HelpWorks *only* [not any capability of HelpWorks Web Edition], i.e. "HelpWorks (TM) is a . . ."

Clearly and obviously non-enabling paragraphs four and five are directed to; and actually discuss; HelpWorks Web Edition.

(Last) paragraph six? Provides only information concerning Peter Martin Associates; with no information about HelpWorks Web Edition; and not even HelpWorks.

So what we're actually left with then is not even 309 words about the supposed construction and operation of HelpWorks Web Edition; but a clearly and very obviously non-enabling four sentences . . . in two paragraphs . . . totaling a minuscule 117 words actually being directed to Web Edition itself.

Given then its clear lack of necessary information, facts, and detail, the alleged PMA press release is clearly and unquestionably non-enabling/non-operable subject matter which does not qualify for—and therefore does not and cannot constitute—a valid reference/ prior art/ enabling disclosure to this art generally; and even further much less so to the instant invention.

The disclosure in an assertedly anticipating reference must provide an enabling disclosure of the desired subject matter; mere naming or description of the subject matter is insufficient, if it cannot be produced without undue experimentation. Elan Pharm., Inc. v. Mayo Found. For Med. Educ. & Research, 346 F.3d 1051, 1054, 68 USPQ2d 1373, 1376 (Fed. Cir. 2003)

Any use of PMA; whether for 35 USC 102 or 103 claims rejections; are, respectfully, improper. Accordingly, all claims should for this reason alone be allowed.

"A reference that is not enabling is not anticipating."

9. Respectfully, since all of Examiners rejections have for the above reasons been rendered moot, there be no need for applicant to proceed further with this brief. Applicant does accordingly request at this time that all the remaining claims be also allowed; and the patent for which applicant has met all the requirements for now be issued.

Please note that; though Applicant may in this brief and/or during these proceedings on occasion inadvertently refer to PMA as “prior art”; or otherwise fail to indicate that such “prior art” is in fact nothing more than supposed or alleged prior art as Applicant fully addresses and responds to Examiners various statements, contentions, etc; Applicant’s well-supported and documented position that alleged PMA is *not* valid prior art [i.e. being date uncertain, non-enabling, etc] at all times remains fully in force and effect in this brief and throughout these proceedings.

Furthermore, even supposed PMA isn’t PMA. Specifically, because only paragraphs four and five of the six paragraph (supposed) press release speak about Web Edition, any reference to/use of “PMA” is more accurately “PMA paragraphs 4 & 5.”

10. Even if the rejections were not already moot for the reasons above, the rejections would *still* be overcome, traversed, and/or rendered moot; as follows:

USC 102/103 Claim Rejections Overcome: All Claims Allowable

11(A). As they contain no accompanying explanations to the rejections as is required/customary with 103 rejections (i.e. Examiner stating, “*...PMA fails to expressly disclose... .*” followed by “*However... .*”), applicant believes that Examiner has, apparently, inadvertently continued to designate a number of claims as being subject to alleged 103 rejections as opposed to the intended (?) alleged 102 rejections; specifically: #16, p.5 (claims 184, 206, 228, 250); #22, p.6 (claims 191, 213, 235, 257); #23, p.6-7 (claims 192, 214, 236, 258); #24, p.7 (claims 193, 215, 237, 259); #25, p.7 (claims 194, 216, 238, 260); #26, p.7 (claims 195, 217, 239, 261); #27, p.7 (claims 196, 218, 240, 262); #30, p.8 (claims 198, 220, 242, 264); and #31, p.8 (claims 199, 221, 243, 265).

Applicant requests that should this not be the case, that applicant be notified of, and be allowed to respond to, such notification.

11(B). Furthermore; Re #21, p.6 of OA; clarification is needed with respect to the position(s?) Examiner is taking regarding claims 190, 212, 234, and 256; as it is unclear whether they were rejected based on USC 102, 103, (or the utilization of) Official Notice, some combination thereof, or ?

#21's initially worded like a 102 rejection, "...PMA discloses..." ; but then goes on to reference, "PMA Commerce" ; and that Applicant should see the rejection of claims 189, 211, 233, and 255 (even though these claims were rejected on a 103 basis). And was Official Notice taken on these claims as it was on claims 189, 211, 233, and 255?

For the sake of expediency, Applicant will; in due order following; explain why claims 190, 212, 234, and 256 are themselves also all allowable; regardless of 102, 103, and/or Official Notice. For the record, Applicant requests that Examiner nevertheless explain just what Examiner's position was/is regarding these four claims; with Applicant being granted the commensurate opportunity to address any contention(s)/matter(s) concerning these four claims which Applicant has not had the opportunity to address; or address fully; in this brief.

12. Regardless of whether or not Examiners intention was to attempt to use USC 102, or 103, as the basis for rejections of those claims not yet being indicated as being allowed and allowable, applicant will now demonstrate that each and every such remaining independent and dependent claim is also neither anticipated nor obvious by alleged PMA.

Non-Human Benefit Seekers—All Claims Directed to Such Allowable

13. The alleged PMA was only for use by and for humans; not for businesses, governments, educational institutions, or non-profits. As this is clearly unique, non-obvious, unsuggested, and patentably distinct over the alleged PMA, for this reason alone

the remaining/ appealed “non-human” claims 225, 228, 232-247, 250, 254 and 268 should, respectfully, be allowed.

The differences between living, breathing, guaranteed-to-someday-die human beings and inanimate, can exist forever businesses, governments, educational institutions, and non-profits are clearly more patentably distinct than the differences between a human being and a fellow living, breathing, guaranteed-to-someday-die dog, cat, horse . . . and all other living creatures.

Accordingly, all of the instant invention’s claims directed to non-human benefit matching; being far more patentably distinct from human benefit matching than those between living creatures [for which species-specific drugs, etc are well-settled as being allowable]; are themselves also allowable.

Furthermore, as is the case with all the instant invention’s dependent claims, all the non-human dependent claims do themselves incorporate all of the limitations of their respective non-human independent claims and add additional limitations and subject matter and thus are a *a fortiori* patentable. In addition, the dependent claims are themselves each also independently patentable, as will be readily appreciated further on within this brief.

14. Re: OA p.3-4, #9-10 and p.4-5, #13-15: Claims 270-272 and 181, 203, 225, and 247 are neither anticipated nor rendered obvious by the alleged PMA for at least the following reasons:

- A. PMA discloses and/or suggests no more than human benefit-matching.
- B. PMA discloses and/or suggests no more than benefit matching services provided by and available from agencies.
- C. PMA discloses and/or suggests no more than benefits available from and provided by federal, state, and/or local governments. [provisional]

D. PMA discloses and/or suggests no more than the required use of privacy-invasive, loss of anonymity, personal identification (i.e. name, social security number, drivers license/number) of the benefit seekers. [provisional]

"A claim is anticipated only if each and every element as set forth in the claim is found, either expressly or inherently described, in a single prior art reference."
Verdegall Bros. v. Union Oil Co. of California, 814 F.2d 628, 631, 2 USPQ2d 1051, 1053 (Fed Cir. 1987)

Note that; given the extreme paucity of useful, applicable information in alleged PMA; "C" and "D" above are stated as distinguishing features over alleged PMA on a *provisional basis only*; meaning that they would apply only were it to be legally demonstrated; either in these proceedings or at some future time; that HelpWorks and HelpWorks Web Edition both had these specific and particular two characteristics in common; at some date prior to the priority date of the instant invention.

Applicant's modification of this status for "C" and "D" from his previous position resulted from a closer, paragraph-by-paragraph examination of this supposed press release during the preparation of this brief; where it's now clear that that no evidence in the alleged prior art PMA states nor reasonably suggests that HelpWorks *Web Edition* had the characteristics contained in "C" and "D."

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, claims 225 and 247 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

Finally; note that in #15 p.5; Examiner has stated, correctly, that; per paragraph #3 of alleged PMA; that HelpWorks *can be configured to evaluate any or all benefits and*

programs required . . . However, it is the construction and operation of HelpWorks Web Edition; and not HelpWorks; which is at issue here.

Accordingly, any statement(s) or inferences that the HelpWorks Web Edition way of screening [but how?] (referenced in paragraph four; *not* three; of alleged PMA) was configurable at all; much less configurable to evaluate *any or all benefits and or programs required*; is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to “duct tape” any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Editon; even for this reason only; independent claims 181, 203, 225, and 247 should be allowed.

15. Re: OA p.5, #16 (claims 184, 206, 228, 250): Nothing in PMA teaches, discloses, or suggests such useful and valuable storage of part or all of system users data (i.e. in order to save time having to complete a new application for each benefit check, for automated notification of change/s in benefits, etc.) Neither HelpWorks nor HelpWorks Web Edition (WE) offered such capabilities. Storing such “benefit-matchable” data was not at all inherent to internet operations, and there’s not even a suggestion in alleged PMA that Expert Eligibility Server had such an obviously novel and valuable capability.

While databases and their use and administration were of course known to the arts generally, note that the architecture for and procedures to implement such capability/ies was not conventional in the breakthrough benefits-matching instant invention.

Still furthermore, claims 228 and 250 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

16. Re: OA p.5-6, #17-18. Claims 188, 210, 232, and 254 are neither anticipated nor rendered obvious by the alleged PMA for at least the following reasons:

- A. Since, as per #15 above, alleged PMA neither teaches nor suggests the *storage* of users data, a fortiori it cannot teach the requirement that such users *must* update their data as a condition of continued system use.
- B. These claims absolutely *require* data updating as a condition of use; at best, alleged PMA teaches and/or suggests merely that users *could* or *should* update. This is a critical, valuable, and patentably distinct difference and improvement.

Furthermore, even if such required data updating *were* known to the art generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 232 and 254 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

17. Re: OA p.6, #19-20. Claims 189, 211, 233, and 255 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests income/value payment/remuneration based on at least the partial value of—or some part to all—of at least one or more of the benefits themselves. Charging for general services provided to users (but not benefit seekers) at the time of the invention consisted merely of conventional means, i.e., by subscription, per-use, etc.

Because this unique capability allows for the benefits themselves to act, as least in part, as the financial support mechanism for the instant invention, financial support from the benefit seekers and/or others can be reduced or eliminated. Neither HelpWorks nor HelpWorks Web Edition systems offered, taught, or suggested such an obviously useful capability.

Accordingly, Applicant respectfully contests the Examiner's taking of Official Notice; and requests that; per at least 37 CFR 1.104(d)(2); Examiner provide and make of record

the specific factual findings, explicit basis for a clear and unmistakable technical line of reasoning, concrete evidence, and authority within an affidavit or declaration; that Examiner believes exists to support Examiner's position that each of these clearly creative and unconventional, unique, and valuable *from the benefits themselves* payment/income generation options were a well-known form of business at the time the invention was made.

Official notice unsupported by documentary evidence should only be taken by the examiner where the facts asserted to be well-known, or to be common knowledge in the art are capable of instant and unquestionable demonstration as being well-known. As noted by the court in *In re Ahlert*, 424 F.2d 1088, 1091, 165 USPQ 418, 420 (CCPA 1970), the notice of facts beyond the record which may be taken by the examiner must be "*capable of such instant and unquestionable demonstration as to defy dispute*" (citing *In re Knapp Monarch Co.*, 296 F.2d 230, 132 USPQ 6 (CCPA 1961)). MPEP 2144.03(A)

If Applicant Challenges a Factual Assertion as Not Properly Officially Noticed [as here] or [here; and] Not Properly Based Upon Common Knowledge [as here], the Examiner Must Support the Finding With Adequate Evidence MPEP 2144.03(A) [boxes added]

Furthermore, even if such payment/income generation options *had* been known to the arts generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 233 and 255 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

18. Re: OA p.6, #21. Claims 190, 212, 234, and 256 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the benefit providers themselves paying to have their benefits made available to the benefit seekers. Having benefit providers compensate system operator—whether paid by such providers directly and/or through third parties—flips convention on its head. Such an approach will make such benefit-providing services more easily and affordably accessed by the benefit seekers.

In addition; if Examiner intended to take Official Notice regarding these four claims; which is unclear to Applicant from the comments (please also see 11(B)., above) in this most recent OA; Applicant respectfully contests the Examiner's taking of Official Notice; and requests that; per at least 37 CFR 1.104(d)(2); Examiner provide and make of record the specific factual findings, explicit basis for a clear and unmistakable technical line of reasoning, concrete evidence, and authority within an affidavit or declaration; that Examiner believes exists to support Examiner's position that each of these clearly creative and unconventional, unique, and valuable *where the benefit providers themselves pay to present their benefits to the benefit seekers* payment/ income generation options were a well-known form of business at the time the invention was made. See *In re Ahlert*, *supra*; *In re Knapp Monarch Co.*, *supra*; MPEP 2144.03(A), *supra*; MPEP 2144.03(A), *supra*.

Furthermore, even if such payment/income options *had* been known to the arts generally, note that the architecture for and procedures to implement this capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 234 and 256 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

19. Re: OA p.6, #22. Claims 191, 213, 235, and 257 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the useful and valuable, *"keep the benefits and benefits information as current as possible"* as disclosed in the instant invention. Keeping such data as current as possible in this manner is entirely foreign to alleged PMA. While "user configurable" capability is known to the arts in general-use sense, note that the architecture for and procedures to implement this capability is not conventional in the breakthrough benefits-matching instant invention.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Finally, note that claims 235 and 257 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

20. Re: OA p.6-7, #23. Claims 192, 214, 236, and 258 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the completely counter-intuitive, clearly unconventional revealing/providing of benefit/benefit provider information which *does not* correspond to benefit seekers data; nor the providing of application forms, contact information, or maps. The fact that the HelpWorks system (which is *not* HelpWorks WE) is meant to be a screening and referral tool *does not* also mean that the applications forms, contact information, and a map/directions are *automatically* generated in/via the message (and *directly* delivered to the benefit seeker *without* the involvement or assistance of another, i.e. a social worker printing off and/or handing forms to the benefit seeker); as is required by these four claims. Alleged PMA says or suggests nothing about these novel, valuable capabilities.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Examiner has correctly stated that the HelpWorks system is meant to be a screening and *referral* tool. However:

First, because it is HelpWorks *Web Edition* which is at issue here and not HelpWorks; because Examiner has rejected these claims based on a capability not in evidence; even for this reason alone claims 192, 214, 236, and 258 should be allowed.

Second, even if Examiner intended to say HelpWorks Web Edition instead of HelpWorks, there is nothing in alleged PMA to indicate or even suggest; *even if it were a screening and referral system generally* (which Applicant disputes), that Web Edition provided the obviously novel, valuable, and useful capabilities of claims 192, 214, 236, and 258. Nothing.

Finally, note that claims 236 and 258 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

21. Re: OA p.7, #24. Claims 193, 215, 237, and 259 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the clearly useful and valuable capability of the benefit seekers and benefit providers being able—once the benefits which correspond to the seekers data have been identified—to connect and interact *directly* via the system (i.e. over the Internet); without the involvement of non-benefits-providing intermediaries.

HelpWorks; requiring such intermediaries, is a *referral* tool only in the sense that the benefit seeker is *human* referred to benefit providers. And while HelpWorks WE may not require such human involvement, alleged PMA also neither says/teaches—nor even suggests—*directly via the system* connecting seekers with providers, nor enabling interaction between seekers and providers, nor completing application forms, nor assisting in the completion of the application forms, nor transmitting the benefit approvals, nor transmitting approval acceptances, nor receiving benefits, nor utilizing benefits.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Examiner has correctly stated that the HelpWorks system is meant to be a screening and *referral* tool. However:

First, because it is HelpWorks *Web Edition* which is at issue here and not HelpWorks; because Examiner has rejected these claims based on a capability not in evidence; even for this reason alone claims 193, 215, 237, and 259 should be allowed.

Second, even if Examiner intended to say HelpWorks Web Edition instead of HelpWorks, there is nothing in alleged PMA to indicate or even suggest; *even if it were* a screening and referral system generally (which Applicant disputes), that Web Edition provided the obviously novel, valuable, and useful capabilities of claims 193, 215, 237, and 259. Nothing.

Finally, note that claims 237 and 259 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

22. Re: OA p.7, #25. Claims 194, 216, 238, and 260 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the clearly useful and valuable capability of real or near real time benefit matching. No such capability/ies are disclosed in alleged PMA. The fact that HelpWorks WE was web based does not automatically insure that benefit results were instantly (or even nearly so) available upon the submission of the seekers data. They could have been delivered (i.e. e-mailed) an hour, day, or more after data submission. Who knows? Alleged PMA doesn't say, or even suggest.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 238 and 260 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

23. Re: OA p.7, #26. Claims 195, 217, 239, and 261 are neither anticipated nor rendered obvious by alleged PMA at least because all these four claims include the limitation, “*via said system*.” With neither HelpWorks nor HelpWorks WE are caseworkers able to have the seekers benefit information shared with them *via the system* (i.e. via the Internet). This capability enables, for example, a benefit seeker to share the benefit match results with a relative in a different state or country (i.e. have the results concurrently displayed on their own computer or cell phone/PDA screen). There be no teaching nor suggestion nor support for such a capability in alleged PMA.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, Applicant finds no Examiner stated, “*(Provide(r?) user results in caseworker example)*” in alleged PMA to support Examiner’s contention. Accordingly, there being no support for this position, even for this reason only claims 195, 217, 239, and 261 should be allowed.

Finally, note that claims 239 and 261 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

24. Re: OA p.7, #27. Claims 196, 218, 240, and 262 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests such capability/ies. Additionally, the useful and valuable disclosing to entities of benefits for which they *may not or do not* qualify for; running as it does completely counter to the

purpose for which benefit matching systems exist in the first place, were obviously not known to the arts.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 240 and 262 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

Finally, as its meaning and intent is unclear, Applicant requests that Examiner explain the intended purpose of the notation, “*(Pg. I)*” at the end of #27 on p.7; further permitting Applicant to properly address such as may be necessary and/or desirable.

25. Re: OA p.8, #28-29. Claims 197, 219, 241, and 263 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests such a *counter-intuitive*, yet clearly useful and valuable *benefits you wouldn't normally be made aware of* capability. The disclosing of benefits without regards to at least some of seekers data clearly runs counter to the purpose and operation of benefit matching systems; including HelpWorks and HelpWorks WE.

Stating that, “*...it would have been obvious to... all users.*”; and especially so without the requisite factual basis and support; is merely unsupported conjecture and supposition. There is no teaching or suggestion in alleged PMA for the use of a *general baseline* or some sort of *basic results available to all users*.

Furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore; note that in #29 p.8; Examiner has stated, correctly, that; per paragraph #3 of alleged PMA; that HelpWorks *can be configured to evaluate any or all benefits and programs required . . .* However, it is the construction and operation of HelpWorks Web Edition; and *not* HelpWorks; which is at issue here.

Accordingly, any statement(s) or inferences that the HelpWorks Web Edition way of screening [but how?] (referenced in paragraph four; *not* three; of alleged PMA) was configurable at all; much less configurable to evaluate *any or all benefits and or programs required*; is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to “duct tape” any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Edition; and specifically the above capability; even for this reason alone; claims 197, 219, 241, and 263 should be allowed.

Finally, note that claims 241 and 263 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

26. Re: OA p.8, #30. Claims 198, 220, 242, and 264 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests the clearly useful and valuable benefit provider *direct submission into system* capability. Neither HelpWorks nor HelpWorks WE offered or suggested such a capability. Prior art benefit matching systems relied instead on the time-consuming human gathering of benefit information from the benefit providers; which was further then human entered into the benefit matching systems. These four claims provide obviously huge time, labor, and money savings advantages over any and all previous benefit matching systems.

Despite it's use by Examiner, there is/are no “*User configurable*” statement(s) concerning HelpWorks Web Edition in supposed PMA. The closest such is the use of the word

“*configured*” in paragraph three. But; as explained previously; paragraph three talks *only* about HelpWorks; *not* about Web Edition, which is what’s at issue here.

Accordingly, any statement(s) or inferences that HelpWorks Web Edition was “*User configurable*” at all; much less configurable *by the benefit providers themselves* (something not even HelpWorks could do); is, respectfully, mere unpermitted supposition and speculation.

Therefore; because there is no basis to “duct tape” any construction or operational features or capabilities of HelpWorks on to HelpWorks Web Edition; and specifically no basis for the ability for the benefit providers themselves to submit benefit information or benefits directly into the system; even for this reason alone; claims 198, 220, 242, and 264 should be allowed.

Furthermore, these four claims also contain “*...and or said benefits...*” ; which is an even further useful and valuable capability; and another one which supposed PMA neither teaches nor suggests. Actually delivering the benefits themselves (i.e. monetary transfers, certificates, coupons, vouchers, etc) *directly* through the system (i.e. via the Internet) to qualified benefit seekers? Unanticipated and nonobvious indeed!

Still furthermore, even if such capabilities *had* been known to the arts generally, note that the architecture for and procedures to implement such capabilities would *still* not be conventional in the breakthrough benefits-matching instant invention.

Finally, note that claims 242 and 264 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

27. Re: OA p.8, #31. Claims 199, 221, 243, and 265 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests this clearly useful and valuable *third party submitter* capability. Neither HelpWorks nor HelpWorks

WE offered or suggested such capability. The ability of benefit providers to have others handle their benefit submissions (and administration) for them is a clear advantage to those providers who would otherwise find it difficult to submit them themselves (i.e. with their own staff/employees). Additionally, benefit submission specialists may be able to provide additional value add services to the benefit provider industry.

In addition, as the Examiner-relied upon “*PMA configured presets—government benefits*” can *at best only* refer to the structure/operation of HelpWorks and *not Web Edition* (as “*configured*” and “*government*” are found only in “directed-to-HelpWorks-only” paragraph three); Examiner’s misdirected statement can not form a basis for the rejection of these claims. Accordingly, even for this reason alone, claims 199, 221, 243, and 265 should be allowed.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 243 and 265 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

28. Re: OA p.8, #32-33. Claims 200, 222, 244, and 266 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests this clearly useful and valuable *variable benefits* capability. Neither version of HelpWorks offered such capability. Benefit systems of the time required the *completion* of an application form in order to determine benefits qualification; incomplete applications—lacking *all* the necessary information/data—could not be entered; or if able to be entered, would not produce any results.

While applicant acknowledges that many database correlation systems of the time did supply variable data output as the input varied, it’s important to note that such capability

was *not* used in benefit matching systems of the time (i.e. HelpWorks); as it would have been illogical (in their viewpoint, anyway) to allow benefit seekers to submit what the system (and benefit) providers considered incomplete applications.

Yet; as applicant has pointed out; though counter-intuitive to the field at the time; there's actually great *unanticipated* and *nonobvious* value in being able to discover *at least some* of the benefits one qualifies for, even with what the field at the time considered to be useless "incomplete" benefit seeker data submissions.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention.

Still furthermore, note that claims 244 and 266 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

29. Re: OA p.9, #34-35. Claims 201, 223, 245, and 267 are neither anticipated nor rendered obvious by alleged PMA at least because it neither teaches nor suggests this clearly useful and valuable *phantom data* capability. Inputting inaccurate information runs completely counter to the whole purpose of benefit matching systems (of the time); which of course required completely accurate information in order to deliver accurate benefit information. Yet allowing the use of phantom data, as applicant explains in his specification, actually provides some very useful and worthwhile information to the seeker. Examiner's stated "... *the best-fit option...*" cannot logically be anything *but* the actual *factual* data of a benefit seeker because *only* by the use of completely *factual* information will a seeker be able to discover any and all the benefits applicable to seeker. *That* is the best-fit option.

These four claims are not for the determination of best-fit options at all; but instead allow seekers to discover what benefits they could qualify for *if* at least some of their

demographic, etc traits and characteristics were *different* than what they *really* are; i.e., if they earned more—or less—income, lived in a different city, were a different marital status, etc. There's clearly great *unanticipated* and *nonobvious* value and usefulness with this counter-intuitive capability; which capability is different (patently different) than the capability of claims 200, 222, 244, and 266.

Furthermore, even if such a capability *had* been known to the arts generally, note that the architecture for and procedures to implement such a capability would *still* not be conventional in the breakthrough benefits-matching instant invention. Still furthermore, note that claims 245 and 267 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

30. Re: OA p.9, #36-38. Claims 202, 224, 246, and 268 are neither anticipated nor rendered obvious by alleged PMA at least because the architecture for and procedures to implement such a capability are not conventional in the breakthrough benefits-matching instant invention.

As per the specification, “*Identification (ID) information*” refers to true, unquestioned, personally-identifying information such as actual name, social security number, street address, drivers license number, etc; *not* an easily spoofed and/or often/usually unconfirmable e-mail address (and in any case; who knows who sent any particular e-mail from a given e-mail address?) or web connection (identifies the computer; not the computer user/benefit seeker).

In one non-limiting embodiment, such a capability more easily allows those entities providing products and services legally restricted to being received by, i.e. people of a minimum age (alcohol, tobacco products, etc); to insure that the benefit seekers meet such legal requirements before the benefit(s) are supplied (or even offered) to them. Examiner's examples; e-mail, we-connection ID (#37), user ID (#38); are obviously insufficient to meet such legal verification(s).

In another non-limiting, non-human embodiment, such a capability would; for example; allow a small Idaho-based business-to-business firm which only sells and services its products in Idaho, to limit its benefit offer (i.e. a free trial, free 30 days of maintenance, free installation) to companies willing to provide a verifiable, confirmable address within the state of Idaho; where they don't want companies outside Idaho even knowing about their benefit offer.

Furthermore, note that claims 246 and 268 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

The Proposed Modification Cannot Render the Prior Art Unsatisfactory for Its Intended Purpose (MPEP 2143)

If proposed modification would render the prior art invention being modified unsatisfactory for its intended purpose, then there is no suggestion or motivation to make the proposed modification. In re Gordon, 733 F.2d 900, 221 USPQ 1125 (Fed. Cir. 1984)

31. As demonstrated previously in this brief, alleged PMA is clearly non-enabling. That said, what we do know about HelpWorks Web Edition; were PMA valid prior art; is that it was no more than benefit matching for humans; and then only those benefits *an agency* wished to provide.

Yet the instant invention; and particularly so in the case of the all-entity claims as well as the non-human claims; was not so constricted or limited. Specifically, because any attempt to modify Web Edition in such a way to enable it to match and supply benefits to (in particular) non-human or all (all entities) benefit seekers would render it unsatisfactory for its intended purpose of matching *agency sourced* benefits to humans, then there is no suggestion or motivation to make the proposed modification.

Accordingly; even for this reason alone; all claims should be allowed.

The Proposed Modification Cannot Change the Principle of Operation of a Reference (MPEP 2143)

If the proposed modification or combination of the prior art would change the principle of operation of the prior art invention being modified, then the teachings of the references are not sufficient to render the claims prima facie obvious. In re Ratti, 270 F.2d 810, 123 USPQ 349 (CCPA 1959)

32. As demonstrated previously in this brief, alleged PMA is clearly non-enabling. That said, what we would know about HelpWorks Web Edition were PMA valid prior art, is that it was no more than benefit matching for humans; and then only those benefits *an agency* wished to provide.

Yet the instant invention; and particularly so in the case of the all-entity claims as well as the non-human claims; was not so constricted or limited. Specifically, because HelpWorks Web Edition would require a substantial reconstruction and redesign even of the few non-enabling elements shown in the alleged reference; as well as a change in the basic principle under which Web Edition was apparently designed to operate; in order to match and supply benefits to (in particular) non-human or all (all entities) benefit seekers; the principle of operation would of necessity have to be changed.

The teachings of the reference are therefore not sufficient to render the claims prima facie obvious. Accordingly; even for this reason alone; all the claims should be allowed.

Allowable Subject Matter

33. Re OA #39-40, p.9. Re: Claim 269. Applicant notes that not only does the supposed prior art fail to expressly teach or disclose this capability; but that it also clearly fails to even suggest such an obviously valuable and useful capability.

Response to Response to Arguments

34. Re OA #47, p.11. It is respectfully requested that Examiner clarify, “*Applicant’s arguments filed 9/20/06* ; as Applicant’s most recent response/filing was the one filed in April of 2007, not 9/20/2006. Should such clarification result in a change in Examiner’s position(s), arguments, etc; then Applicant requests the opportunity to respond to such change(s).

35. Re OA #49; p.11-12. Respectfully:

A) Examiner has misconstrued Applicant’s position concerning what PMA is. Specifically as per Applicant’s # 5 of this brief, Applicant argues; not that PMA is not valid prior art because an *additional* press release was issued regarding similar subject matter on 4/24/2001, but, that HelpWorks Web Edition was *brand new*—which is completely illogical—*on two different dates*; and over 18 months apart.

While Applicant acknowledges that there is a difference in the wording, that is not the primary point at hand here; which is how—or why—would any company; let alone an obviously reputable one (i.e. held government contracts) like Peter Martin; announce to the public; and especially so to their marketplace *including critically important existing and potential future clients*; that they launched an important new product/service twice . . . 1½ years apart?

The Louisiana Purchase was not consummated in 1803 and in 1805.

Man did not land on the moon for the first time in 1969 and in 1971.

HelpWorks Web Edition was not launched in 1999 and in 2001.

B) Furthermore; respectfully; Examiner has misconstrued which party is responsible for proving what, when. Specifically, because by law, submitted inventions carry the presumption of validity/patentability, it is the *Examiners* who are charged with proving/demonstrating that a claimed invention *is not* entitled to issuance/allowance; should they believe that such is the case.

Applicant does not have to prove that such asserted subject matter (here; supposed PMA) is *not* valid art [i.e. date certain, content enabling]; (anymore than someone accused in a trial has to prove they are innocent). To the contrary, Examiner has to prove that it is.

“whether information is printed, handwritten, or on microfilm or magnetic disk or tape, etc., the individual [here; Examiner] who wishes to characterize the information as a printed publication...should produce sufficient evidence of its dissemination or that it has been otherwise available and accessible to persons concerned with the art to which the document relates...” Wyer, 655 F.2d at 227, 210 USPQ at 795, Amazon.com v. Barnesandnoble.com, 73 F. Supp. 2d 1228, 53 USPQ 2d 1115, 1119 (W.D. Wash. 1999)[box added]

Plus this from MPEP 2142:

“The examiner bears the initial burden of factually supporting any prima facie conclusion of obviousness.”

Given then the clear date uncertainty of any alleged “PMA,” the argument made by the Examiner regarding the validity of PMA holds no proof that some supposed “9/28/99” version is proper prior art is itself merely a speculative comment.

C) For the reasons stated earlier in this brief, it’s clear that; contrary to Examiners contentions otherwise; that the supposed “9/28/99” PMA:

1. Cannot be treated as some kind of “original,” date accurate press release.
2. Even if it were date accurate, it in no way contains sufficient subject matter (i.e. only 117 *Web Edition* applicable words) which would enable one of ordinary skill in the art at the time the invention was made to recreate the business method/system without undue experimentation.

“Art found during the search must qualify as ‘prior art’ as defined by 35 U.S.C. 102 before it can be used to reject a claimed invention. This involves determination of when art became public, who was the source of the art (e.g., the inventor or another party), and whether the art satisfies the enablement provision of 35 U.S.C. 112, first paragraph.” [emphasis added]
<http://www.uspto.gov/web/menu/busmethp/busmeth103rej.htm>

Mere Statement that the Claimed Invention is Within the Capabilities of One of Ordinary Skill in the Art is Not Sufficient by Itself to Establish Prima Facie Obviousness

D) Finally; the last sentence in #49 states, “*The Examiner also believes that the original press release (9/28/99) contained sufficient subject matter, which would enable one of ordinary skill in the art at the time the invention was made to create the business method/system.*”

Yet, because this lacks any articulated reasoning with some rational underpinning to support a legal conclusion of obviousness, it is; respectfully; merely a one-sentence conclusory statement.

[R]ejections on obviousness cannot be sustained by mere conclusory statements; instead, there must be some articulated reasoning with some rational underpinning to support the legal conclusion of obviousness.” KSR, 550 U.S. at ___, 82 USPQ2d at 1396 quoting *In re Kahn*, 441 F.3d 977, 988, 78 USPQ2d 1329, 1336 (Fed. Cir. 2006). MPEP 2143.01

Accordingly; because there is no basis for a finding of obviousness; even for this reason alone all the claims should be allowed.

36. Re: OA #50, p.12. First, respectfully, Examiner has here misconstrued Applicant’s position. Specifically; as we are now and have most recently been dealing with just one (supposed) reference (PMA); Applicant has in fact made *no* arguments that, “*...the references [note plural] fail to show certain features of applicant’s invention, ...*”

Accordingly; as there are no “*references*”[plural] of record, and therefore no basis for the rejection of claims 270-272; even for this reason alone claims 270-272 should be allowed.

Furthermore, it is well-settled that the nature/form of this/these type/s of claim/s (i.e. means + function, step + function) are such that; if and where necessary; the features of

claims 270-272 which distinguish them over supposed prior art PMA may/are (to be) found in the specification itself; and need not be explicitly stated in the claims themselves.

Still furthermore, it is well settled that to ascertain the meaning of the claims, one may look to the written description, the drawings, and the prosecution history. See, e.g., *DeMarini Sports, Inc. v. Worth, Inc.*, 239 F.3d 1314, 1324 [57 USPQ2d 1889] (Fed. Cir. 2001).

Here; given the written description and prosecution history of the instant invention, it's clear that the valuable, useful, novel, and unobvious *up to all-entities, up to all benefit providers* benefit-matching teaching of these three claims are easily patentable over the alleged prior art. Benefit matching without limits is clearly patentably distinct over the limited, constricted HelpWorks Web Edition; and starkly so over the virtually non-existent details of it as contained in alleged PMA.

Manifestly then; despite Examiner's untenable contention to the contrary; no limitations from the specification are being read into these claims. They don't have to be. Therefore, because of its antithetical impact, the Examiner's interpretation does not comply with the requirement that claim interpretation must be reasonable and consistent with the specification. See *in re Hyatt*, 211 F.3d 1367, 1372, 54 USPQ2d 1664, 1667 (Fed. Cir. 2000).

Accordingly, even for this reason alone claims 270-272 should be allowed.

37. Re: OA #51-52, p.12. It is well-settled that the nature/form of this/these type/s of claim/s (i.e. means + function, step + function) are such that; if and where necessary; the features of claims 181, 203, 225, and 247 which distinguish them over supposed prior art PMA may/are (to be) found in the specification itself; and need not be explicitly stated in the claims.

Furthermore; as explained in #13-14 of this brief; claims 225 and 247 are addressed, directed, and limited to patently distinct non-human benefit-seeking entities only; making them even for this reason alone allowable.

38. Re OA #53, p.12; even if PMA were valid prior art, which Applicant continues to vehemently contend is clearly not the case:

- A) Supposed PMA does not in fact disclose a method/ system of offering benefits from a wide variety of providers to a wide variety of “consumers”; but merely a method/ system for matching humans with benefits from government agencies.
- B) Furthermore, Examiner’s attempt to here define and/or expand the meaning of “consumers” as/to including businesses, governments, educational institutions, and non-profits is without support or foundation. As is seen in other arts (i.e. pharmaceuticals, biologicals), it is well settled that even the differences between different species of living creatures are easily patentably distinct.

Indeed, the differences between living, breathing, *guaranteed-to-die* human beings and inanimate businesses, governments, educational institutions, and non-profits are clearly more patentably distinct than the differences between a human being and a fellow living, breathing, *guaranteed-to-die* dog, cat, horse . . . and all other living creatures.

Accordingly, Examiner’s belief that the language used by the supposed prior art for method/system users is equivalent to the stated users indicated by Applicant is, respectfully, clearly unfounded.

39. Re OA #54, p.12. Respectfully; to no less than the degree required of unrepresented, pro se Applicants (i.e. SS 41.37 of the Patent Rules) such as himself, Applicant has in no fewer communications with Examiner than this brief, addressed this request. Further; for no fewer than each of the claims not yet allowed; Applicant has in this brief carefully,

thoughtfully and specifically indicated the exact claim and subject matter which the supposed cited prior art fails to teach or reasonably suggest.

40. Re OA #55-56, p.12-13. Respectfully, Applicant disagrees with the characterization by Examiner that the supposed prior art fails to teach “several” elements taught by the dependent claims. In fact; as is clear from Applicant’s above *dependent claim-by-dependent claim* explanation; the supposed prior art does not fail to teach merely *several* elements taught by the dependent claims, but in fact fails to teach (or even suggest) all the elements taught by the dependent claims.

Also (Re #56); as Applicant did in his 4/17/2007 Response to the last (most recent), 1/18/2007 Non-Final office action; each 103(a) rejection was previously acknowledged, addressed, and overcome. Finally, as previously noted above, Applicant contests the taking of Official Notice.

41. The following two paragraphs are a quotation from the appropriate portion of the USPTO website which (if and where applicable; *also*) forms a basis for the rejection of a *prima facie* case of obviousness:

“To establish a prima facie case of obviousness, three basic criteria must be met. First, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference or to combine reference teachings. Second, there must be a reasonable expectation of success. Finally, the prior art reference (or references when combined) must teach or suggest all the claim limitations.”

“The initial burden is on the examiner to provide some suggestion of the desirability of doing what the applicant has done. To support the conclusion that the claimed invention is directed to obvious subject matter, either the references must expressly or impliedly suggest the claimed invention or the examiner must present a convincing line of reasoning as to why the artisan would have found the claimed invention to have been obvious in light of the teachings of the references. Both the suggestion to make the claimed combination and the reasonable expectation of success must be founded in the prior art and not in applicant’s disclosure.”

<http://www.uspto.gov/web/menu/busmethp/busmeth103rej.htm>

Furthermore:

The key to supporting any rejection under 35 U.S.C. 103 is the clear articulation of the reason(s) why the claimed invention would have been obvious. The Supreme Court in KSR noted that the analysis supporting a rejection under 35 U.S.C. 103 should be made explicit. MPEP 2143: Basic Requirements of a Prima Facie Case of Obviousness

42. As a critical safeguard against hindsight analysis and rote application of the legal test for obviousness, Examiner has failed to explain; for any of the claims; the specific understanding or principle within the knowledge of an ordinary-skilled person that would motivate one with no knowledge of the instant invention to make the suggested modifications to the alleged reference.

The reviewing court has repeatedly cautioned against employing hindsight by using the appellant's disclosure as a blueprint to reconstruct the claimed invention from the isolated teachings of the [here; alleged] prior art. See, e.g. Grain Processing Corp. v. American Maize- Prods. Co., 840 F.2d 902, 907, 5 USPQ2d 1788, 1792 (Fed Cir. 1988). [box added]

43. Examiner has furthermore not set forth any basis for a reasonable expectation of success; for any of the claims; of a modification of the alleged reference; which reasonable expectation must be found in the alleged prior art reference. See *Brown & Williamson Tobacco Corp. v. Philip Morris Inc.* 229 F.3d 1120, 56 USPQ2d 1456, (Fed. Cir. 2000) and *In re O'Farrell*, 853 F.2d 894, 903-04, 7 USPQ2d 1673, 1680-81 (Fed. Cir. 1988).

44. Still furthermore; as can be readily appreciated by the forgoing claim-by-claim treatment and analysis by Applicant; the alleged prior art reference neither teaches nor suggests the required all the claim limitations of any of the claims of the instant invention.

45. Accordingly and respectfully, as Examiner has not met *even one* of the basic criteria; much less the required three in order to establish a prima facie case of obviousness for all; further much less any; of the claims; all the claims should be allowed.

*The Examiner may not, because of doubt that the invention is patentable, resort to speculation, unfounded assumption, or hindsight reconstruction to supply deficiencies in the factual basis for the rejection. See *In re Warner*, 379 F.2d 1011, 1017, 154 USPQ 173 (CCPA), cert. Denied, 389 U.S. 1057 (1968).*

***Overwhelming Objective Evidence/Secondary Considerations—
All Claims Allowable***

Objective evidence relevant to the issue of obviousness must be evaluated by Office personnel. KSR International Co. v. Teleflex Inc. (KSR), 550 U.S. ___, 82 at 17-18, 148 USPQ at 467 (2007).

46. Even if alleged/supposed PMA was: #1. Date Accurate; #2. Content Accurate; #3. Enabling Disclosure/Subject Matter; and #4. A Prima Facie Case of Obviousness had been established; *all of which Applicant vehemently contends is not the case*, all the claims of the instant invention would still be allowable; for no fewer than the following *objective/secondary considerations*:

***The Novel Features of the Independent Claims Produce New and
Unexpected Results and Hence are Nonobvious and Patentable Over the
(Alleged) Reference Under 35 USC 103***

47. Applicant also submits that the afore-listed and detailed novel features of independent claims 181, 203, 225, 247 and 270-272 [as well as all the claims dependent thereon] are also unobvious and hence patentable under 103 since they produce new and unexpected results over alleged PMA; or any modification thereof.

These new and unexpected results are the ability of the present invention to—*for the first time in history*—provide a practical and economically feasible system for quickly, easily, automatically, and anonymously matching up to an unlimited, or virtually so, of benefit-seeking entities with a wide range of diverse benefits (regardless of their origins or types, classes, categories, etc) made available from up to virtually any number of benefit providers; regardless of any affiliation they may have. The aggregation of so many varied benefits in one place at one time for the benefit of so many produces a compelling,

synergistic, super-efficient “benefit-compounding” effect which produces disproportionate positive results for both the benefit-seeking entities and the benefit providers.

Because it is able to help far more people—*as well as millions and millions of other non-individual entities*--far more often in far more ways than the limited, constricted HelpWorks Web Edition; the new, unexpected, disproportionate, unsuggested, and surprising results provided by the present invention are far and away superior to HelpWorks WE, or any possible modification thereof [illustrated well in *Example/Dawn*; beginning on p. 16 of applicant’s specification]. The novel features of applicant’s method/system which effect these differences are, as stated, clearly recited in independent claims 181, 203, 225, 247, and 270-272.

In fact, one has only to visit the two very successful, infringing services of GovBenefits (GovBenefits.gov) and BenefitsCheckUp (BenefitsCheckUp.com) to see just some of the surprising, wonderful effects of the present invention’s New and Unexpected Results in “real world” action. [Exhibit C (A in first appeal); 4 pages]

It is well settled that these *Unexpected Results by themselves* would rebut a *prima facie* case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Commercial Success Proves Nonobviousness Over the (Alleged) Reference

48. Applicant has found two system/methods which infringe on applicant’s invention and have quickly achieved dramatic nationwide success. As noted in applicant’s previously PTO reviewed-and-approved Petition to Make Special, BenefitsCheckUp [BCU] (benefitscheckup.org), launched in June of 2001 and run by the National Council On the Aging (NCOA); and GovBenefits (govbenefits.gov), launched in April of 2002 and run by the United States Department of Labor, are both—according to both media reports and at their respective web sites (ncoa.org in the case of BenefitsCheckUp)--already each processing 35,000+ (BCU) and 400,000+ (GovBenefits) system users each and every

month. Their quick, phenomenal, little or no commercial advertising successes powerfully demonstrates and proves the value of the novel and unobvious features of the present invention over alleged PMA, or any modification thereof. [Evidence Appendix; Exhibit C (A in first appeal); 4 pages]

While Applicant has no commercial or other contractual interest in these two successful benefit matching method/systems; because they are infringing embodiments of the instant invention; they can reasonably and fairly stand as probative evidence of the commercial success of the instant invention.

It is well settled that these two *Commercial Successes* by themselves would rebut a *prima facie* case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Solution of Long-Felt and Unsolved Need Proves Nonobviousness Over the (Alleged) Reference

49. The present invention solves a long-felt but unsolved need. As explained and detailed in the present invention's specification—additionally backed by its copious collection of non-patent prior art in the IDS—the need for a quick, easy, and accurate way to match benefit-seeking entities with the myriad benefits benefits (regardless of their origins or types, classes, categories, etc) for which they qualify for has been a painful, unmet need for many, many years; stretching back in the U.S. even to the advent of government-provided social welfare programs in the 1930's. Applicant's invention now quickly, easily, and automatically solves this dilemma; something alleged PMA, nor any combination modification.

It is well settled that this *Solution of Long-felt and Unsolved Need* by itself would rebut a *prima facie* case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***Competitive Recognition Proves Nonobviousness
Over the (Alleged) Reference***

50. As noted above, the present invention has been (apparently unknowingly) copied/ put into operation by at least two different infringers—The U.S. Department of Labor and the National Council on the Aging (NCOA). Moreover, James Firman, the President of NCOA, has made a number of statements to the media and via their website (ncoa.org) indicating that BenefitsCheckUp was the first web-based service ever to offer a wide range of benefits to those who are (or may be) qualified to receive them (in NCOA's case, "senior" citizens). Also, laudatory statements are being made on a regular basis to the media by many US federal government office holders and officials praising the wonderful and hugely-popular, Dept. of Labor-run GovBenefits service. [Evidence Appendix; Exhibit C (A in first appeal); 4 pages] Proving the present invention to be nonobviousness over alleged PMA or any modification thereof.

While Applicant has no commercial or other contractual interest in these two commercially successful benefit matching method/systems; because they are embodiments of the instant invention; they can reasonably and fairly stand as probative evidence of the commercial success of the instant invention.

It is well settled that these two cases of *Competitive Recognition by themselves* would rebut a *prima facie* case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

***Assumed Insolubility Proves Nonobviousness
Over the (Alleged) Reference***

51. Looking now again to applicant's extensive collection of non-patent prior art; we see that up to now those skilled in the art thought or found the problems solved by the invention to be insoluble. That is, the present invention converts the failure of others to come up with a quick, easy, and anonymous way to match benefit-seeking entities of any

type directly with an up to unlimited number of (regardless of their origins or types, classes, categories, etc) the benefits (and the benefit providers) themselves.

These failures of prior-art workers indicates that a solution most certainly was not obvious. Proving the present invention to be nonobvious over alleged PMA or any modification of such.

It is well settled that this *Assumed Insolubility* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

New Principle of Operation Proves Nonobviousness Over the (Alleged) Reference

52. Instead of following a well-worn trail looking for incremental improvements in what already existed, the present invention utilizes a new “*anonymous, unlimited*” (i.e. regardless of the benefits’ origins or types, classes, categories, etc *as well as* unlimited benefit providers themselves) benefit aggregation and dissemination ” principle of operation to blaze an exciting new trail; creating a far more effective and useful benefit identification and matching system/method unlike anything that ever existed before (again, as readily seen in the GovBenefits and BCU services). Clearly something neither alleged PMA, nor any modification thereof could ever provide.

It is well settled that this *New Principle of Operation* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Different Problems Solved Proves Nonobviousness Over the (Alleged) Reference

53. Applicant’s invention solves a different problem than the references; and such different problem is recited in the patent/claims. *In re Wright*, 6 USPQ 2d 1959 (1988). Unlike alleged PMA; which suggests no more than it being for humans; the instant invention enables benefit matching for all types of entities; doing so regardless of the benefits’ origins or types, classes, categories, etc. Because the present invention does

therefore solve a different (and far larger and more important) problem than alleged PMA, or any modification thereof, it is nonobvious.

It is well settled that these *Different Problems Solved* (i.e. non-human and all-entity benefit matching) would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Lack of Implementation Proves Nonobviousness Over the (Alleged) Reference

54. If the present invention were in fact obvious, because of its many advantages, those skilled in the art surely would have implemented it long before the present invention's 4/12/2000 PPA priority date. Though a few (limited, constricted, difficult to use, non-Internet enabled, etc) benefit matching systems existed in some form(s) or another(s) since the mid to late 1990's, it wasn't until the June, 2001 launch of the Benefits Check Up service by the NCOA that (an infringing embodiment of) applicant's method/system was brought to the marketplace. That's over at least three years of time; which, given the explosive growth of Internet-based and other business method/systems during this time--*including 1,000's of "business-method" patent filings plus non-patented operating and proposed systems/methods*--clearly and unequivocally demonstrates and proves that the present invention was neither anticipated by nor made obvious by alleged PMA, or any modification thereof.

It is well settled that this *Lack of Implementation* would rebut a prima facie case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

Misunderstood (Alleged) Reference Proves Nonobviousness

55. As Applicant has demonstrated throughout this brief; including claim by claim; the alleged/supposed PMA "reference"; even were it date accurate; is actually no reference at all. As detailed in this brief and previous Applicant responses; given its truly minuscule amount of information concerning HelpWorks Web Edition, it's far, far away from being

the necessary enabling disclosure the Examiner says it is. It is, respectfully yet frankly, not even close.

Therefore; because it cannot and does not teach; and cannot and does not suggest; what the Examiner relies upon as it supposedly teaching or suggesting, it has clearly been misunderstood.

It is well settled a *Misunderstood (Alleged) Reference* ; such as is the case here; rebuts a *prima facie* case of obviousness. Accordingly, even for this reason alone all the claims should be allowed.

No Convincing Reasoning Proves Nonobviousness Over the (Alleged) Reference

56. First (and respectfully); as is readily apparent from the paucity of comments and analysis (such as it is) provided by Examiner concerning the instant invention in general; and even more so when directed to its claims in particular; no convincing reasoning has been provided as to why the claimed subject matter as a whole, including its differences over the supposed prior art, would have been obvious.

Furthermore; and relatedly to # 55 above; since so little information is contained in alleged PMA to begin with (again; only paragraphs four and five are even directed to Web Edition's construction/operation); without relying on both the instant invention itself as an impermissible hindsight guide and/or resorting to considerable also impermissible speculation, supposition, and conjecture concerning the composition, structure, operational details, etc. of HelpWorks Web Edition; it's simply impossible to properly support a case for; or arrive at a finding of; anticipation or obviousness.

For any of the claims.

Conclusion

For each and all these many varied reasons, Applicant accordingly and respectfully requests the allowance of these remaining claims as well.

Very respectfully submitted,



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Claims Appendix

I claim:

181. A system for permitting an individual to more effectively make use of a variety of available benefits from a plurality of benefit providers, wherein said benefits are offered specifically to those individuals eligible to receive said benefits, said system comprising:

means for storing in a memory in the system benefit information, benefit provider information, and benefit correlation information;

means for inputting into said system a set of an individuals demographic, geographic, and psychographic data for said individual;

means for analyzing said individuals data, said benefit provider information, and said benefit correlation information to determine whether any benefit providers are offering potentially applicable benefits for said data and whether said data satisfies requirements for obtaining said potentially applicable benefits;

means for automatically generating a message to directly inform said individual, at least in part via a computer network, of any available benefits applicable to said individuals data.

182. The system of claim 181, further comprising means for the display of said benefits to said individual in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date; day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said individual to one or more of said benefit providers.

183. The system of claim 182, further comprising means for said individual to self-select said manner of benefits listing display.

184. The system of claim 181, further comprising means for the storage of at least a portion of said individuals data.

185. The system of claim 184, further comprising means for updating the status and or availability of benefits for said individual as:

at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more individual applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

186. The system of claim 185, further comprising means for the real time or later notification of said individual of said updating.

187. The system of claim 186, further comprising means for the selection or election of when said individual receives said notifications.

188. The system of claim 184, further comprising means of requiring said individual to update said individuals data as a condition of said individual continuing to remain a system user.

189. The system of claim 181, further comprising means for said individual and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:
on a per benefit disclosed basis;
on a per benefit received basis;
on a per benefit utilized basis;
through said individuals relinquishment of at least a portion of at least one of said benefits;
through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

190. The system of claim 181, further comprising means for the receiving directly and or via one or more third party intermediaries of monetary revenue and or other value from at least one benefit provider.

191. The system of claim 181, further comprising means for one or more from the group of:
 updating benefits data;
 modifying benefits data;
 removing benefits data;
 adding new benefits data.

192. The system of claim 181, further comprising means for said message to:
 reveal one or more of said benefits not applicable to individual;
 provide one or more of said benefit providers not applicable to individual;
 provide one or more of said benefit providers benefit application forms;
 provide one or more of said benefit providers contact information;
 provide a map for and or directions to one or more of said benefit providers.

193. The system of claim 181, further comprising at least one from the group of:
 means for connecting said individual with at least one of said plurality of benefit providers;
 means for said individual to interact with at least one of said benefit providers;
 means for at least one of said benefit providers to offer said benefits to said individual;
 means for the completion of one or more application forms, when applicable, by said individual;
 means for assisting said individual in the completion of one or more application forms;
 means for transmitting at least one benefit approval for said individual by at least one of said benefit providers;
 means for transmitting an acceptance of at least one of said benefits by said individual;
 means for receiving at least one of said benefits by said individual;
 means for utilizing at least one of said benefits by said individual.

194. The system of claim 193, further comprising means for performing at least one of the listed means for in real or near real time.

195. The system of claim 181, wherein said individual benefits and or benefits information is shared with at least one other entity via said system.

196. The system of claim 181, wherein said message includes at least one benefit for which said individual:
may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for.

197. The system of claim 181, wherein said message informs individual of at least one benefit contained within said memory without regards to at least some part of said individuals data.

198. The system of claim 181, wherein one or more of said benefit providers submits said benefit information and or said benefits directly into said system.

199. The system of claim 181, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.

200. The system of claim 181, wherein said available benefits varies according to:
the amount of said individuals data; and or
the completeness of said individuals data.

201. The system of claim 181, wherein at least a partial set of phantom individuals data is inputted; wherein said phantom data does not belong to nor correspond to said individuals actual factual data.

202. The system of claim 181, wherein said individuals data includes individuals identification information.

203. In a system, a method for permitting an individual to more effectively make use of a variety of available benefits from a plurality of benefit providers, wherein said benefits are offered specifically to those individuals eligible to receive said benefits, said method comprising:

storing in a memory in the system benefit information, benefit provider information, and benefit correlation information;

inputting a set of an individuals demographic, geographic, and psychographic data into said system by means of a data entry device electronically communicating with said system;

operating the system to analyze said individuals data, said benefit provider information, and said benefit correlation information to determine whether any benefit providers are offering any benefits applicable to said individuals data;

generating a message automatically to directly inform said individual, at least in part via a computer network, of any available benefits applicable to said individuals data.

204. The method of claim 203, further comprising the step of displaying said benefits to said individual in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said individual to one or more of said benefit providers.

205. The method of claim 204, further comprising the step of individual self-selecting said manner of displaying said benefits.

206. The method of claim 203, further comprising the step of storing at least a portion of said individuals data.

207. The method of claim 206, further comprising the step of updating the status and or availability of benefits for said individual as:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more individuals applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

208. The method of claim 207, further comprising the step of notifying in real time or later said individual upon said updating.

209. The method of claim 208, further comprising the step of selecting or electing when said individual receives said notifications.

210. The method of claim 206, further comprising the step of requiring said individual to update said individuals data as a condition of said individual continuing to remain a system user.

211. The method of claim 203, further comprising the step of said individual and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:
on a per benefit disclosed basis;
on a per benefit received basis;
on a per benefit utilized basis;
through said individuals relinquishment of at least a portion of at least one of said benefits;
through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

212. The method of claim 203, further comprising the step of receiving directly and or via one or more third party intermediaries monetary revenue and or other value from at least one benefit provider.

213. The method of claim 203, further comprising one or more of the steps of:
 updating benefits data;
 modifying benefits data;
 removing benefits data;
 adding new benefits data.

214. The method of claim 203, further comprising one or more of the steps of said message:
 providing one or more of said benefits not applicable to individual;
 providing one or more of said benefit providers not applicable to individual;
 providing one or more of said benefit providers benefit application forms;
 providing one or more of at least one of said benefit providers contact information;
 providing a map for and or directions to one or more of said benefit providers.

215. The method of claim 203, further comprising at least one of the steps from the group of:
 connecting said individual with at least one of said plurality of benefit providers;
 said individual interacting with at least one of said benefit providers;
 at least one of said benefit providers offering said benefits to said individual;
 completing one or more application forms, when applicable, by said individual
 assisting said individual in the completing of one or more application forms;
 transmitting at least one benefit approval for said individual by at least one of said benefit providers;
 transmitting an acceptance of at least one of said benefits by said individual;
 receiving at least one of said benefits by said individual;
 utilizing at least one of said benefits by said individual.

216. The method of claim 215, further comprising the step of performing at least one of the listed steps in real or near real time.

217. The method of claim 203, further comprising the step of sharing said individuals benefits and or benefits information with at least one other entity via said system.

218. The method of claim 203, further comprising the step of including in said message at least one benefit for which said individual:

may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for.

219. The method of claim 203, wherein said message informs individual of at least one benefit contained within said memory without regards to at least some part of said individuals data.

220. The method of claim 203, further comprising the step of one or more of said benefit providers submitting said benefit information and or said benefits directly into said system.

221. The method of claim 203, further comprising the step of at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.

222. The method of claim 203, wherein said available benefits varies according to:
the amount of said individuals data; and or
the completeness of said individuals data.

223. The method of claim 203, further comprising the step of inputting at least some phantom individuals data; wherein said phantom data does not belong to nor correspond to said individuals actual factual data.

224. The method of claim 203, wherein said individual data includes individuals identification information.

225. A system for permitting a business, government, educational institution, or non-profit to more effectively make use of a variety of available benefits from a plurality of benefit providers, wherein said benefits are offered specifically to those businesses, governments, educational institutions, or non-profits eligible to receive said benefits, said system comprising:

means for storing in a memory in the system benefit information, benefit provider information, and benefit correlation information;

means for inputting into said system a set of a businesses, governments, educational institutions, or non-profits demographic, geographic, and psychographic data for said business, government, educational institution, or non-profit.

means for analyzing said business, government, educational institution, or non-profit data, said benefit provider information, and said benefit correlation information to determine whether any benefit providers are offering potentially applicable benefits for said data and whether said data satisfies requirements for obtaining said potentially applicable benefits;

means for automatically generating a message to directly inform said business, government, educational institution, or non-profit of any available benefits applicable to said business, government, educational institution, or non-profit data.

226. The system of claim 225, further comprising means for the display of said benefits to said business, government, educational institution, or non-profit in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits;

importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said business, government, educational institution, or non-profit to one or more of said benefit providers.

227. The system of claim 226, further comprising means for said business, government, educational institution, or non-profit to self-select said manner of benefits listing display.

228. The system of claim 225, further comprising means for the storage of at least a portion of said business, government, educational institution, or non-profits data.

229. The system of claim 228, further comprising means for updating the status and or availability of benefits for said business, government, educational institution, or non-profit as:

at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more business, government, educational institution, or non-profit applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

230. The system of claim 229, further comprising means for the real time or later notification of said business, government, educational institution, or non-profit of said updating.

231. The system of claim 230, further comprising means for the selection or election of when said business, government, educational institution, or non-profit receives said notifications.

232. The system of claim 228, further comprising means of requiring said business, government, educational institution, or non-profit to update said business, government, educational

institution, or non-profits data as a condition of said business, government, educational institution, or non-profit continuing to remain a system user.

233. The system of claim 225, further comprising means for said business, government, educational institution, or non-profit and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:

on a per benefit disclosed basis;

on a per benefit received basis;

on a per benefit utilized basis;

through said business, government, educational institution, or non-profits relinquishment of at least a portion of at least one of said benefits;

through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

234. The system of claim 225, further comprising means for the receiving directly and or via one or more third party intermediaries of monetary revenue and or other value from at least one benefit provider.

235. The system of claim 225, further comprising means for one or more from the group of:

updating benefits data;

modifying benefits data;

removing benefits data;

adding new benefits data.

236. The system of claim 225, further comprising means for said message to:

reveal one or more of said benefits not applicable to business, government, educational institution, or non-profit;

provide one or more of said benefit providers not applicable to business, government, educational institution, or non-profit;

provide one or more of said benefit providers benefit application forms;

provide one or more of said benefit providers contact information;

provide a map for and or directions to one or more of said benefit providers.

237. The system of claim 225, further comprising at least one from the group of:

means for connecting said business, government, educational institution, or non-profit with at least one of said plurality of benefit providers;

means for said business, government, educational institution, or non-profit to interact with at least one of said benefit providers;

means for at least one of said benefit providers to offer said benefits to said business, government, educational institution, or non-profit;

means for the completion of one or more application forms, when applicable, by said business, government, educational institution, or non-profit;

means for assisting said business, government, educational institution, or non-profit in the completion of one or more application forms;

means for transmitting at least one benefit approval for said business, government, educational institution, or non-profit by at least one of said benefit providers;

means for transmitting an acceptance of at least one of said benefits by said business, government, educational institution, or non-profit;

means for receiving at least one of said benefits by said business, government, educational institution, or non-profit;

means for utilizing at least one of said benefits by said business, government, educational institution, or non-profit.

238. The system of claim 237, further comprising means for performing at least one of the listed means for in real or near real time.

239. The system of claim 225, wherein said business, government, educational institution, or non-profit benefits and or benefits information is shared with at least one other entity via said system.

240. The system of claim 225, wherein said message includes at least one benefit for which said business, government, educational institution, or non-profit:

may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for

241. The system of claim 225, wherein said message informs business, government, educational institution, or non-profit of at least one benefit contained within said memory without regards to at least some part of said business, government, educational institution, or non-profit data.
242. The system of claim 225, wherein one or more of said benefit providers submits said benefit information and or said benefits directly into said system.
243. The system of claim 225, wherein at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.
244. The system of claim 225, wherein said available benefits varies according to:
the amount of said business, government, educational institution, or non-profits data; and or
the completeness of said business, government, educational institution, or non-profits data.
245. The system of claim 225, wherein at least a partial set of phantom business, government, educational institution, or non-profits data is inputted; wherein said phantom data does not belong to nor correspond to said business, government, educational institution, or non-profits actual factual data.
246. The system of claim 225, wherein said business, government, educational institution, or non-profits data includes business, government, educational institution, or non-profits identification information.

247. In a system, a method for permitting a business, government, educational institution, or non-profit to more effectively make use of a variety of available benefits from a plurality of benefit providers, wherein said benefits are offered specifically to those business, government, educational institution, or non-profits eligible to receive said benefits, said method comprising:

storing in a memory in the system benefit information, benefit provider information, and benefit correlation information;

inputting a set of a business, government, educational institution, or non-profits demographic, geographic, and psychographic data into said system by means of a data entry device electronically communicating with said system;

operating the system to analyze said business, government, educational institution, or non-profits data, said benefit provider information, and said benefit correlation information to determine whether any benefit providers are offering any benefits applicable to said business, government, educational institution, or non-profits data;

generating a message automatically to inform directly said business, government, educational institution, or non-profit of any available benefits applicable to said business, government, educational institution, or non-profits data.

248. The method of claim 247, further comprising the step of displaying said benefits to said business, government, educational institution, or non-profit in a manner selected from the group consisting of benefit class or category; value of benefits; cost, if any, of benefits; importance of benefits; relevance of benefits; ease of use of benefits; expiration date, day, time of benefits; creation date, day, time of benefits; type of benefits; physical proximity of said business, government, educational institution, or non-profit to one or more of said benefit providers.

249. The method of claim 248, further comprising the step of business, government, educational institution, or non-profit self-selecting said manner of displaying said benefits.

250. The method of claim 247, further comprising the step of storing at least a portion of said business, government, educational institution, or non-profits data.

251. The method of claim 250, further comprising the step of updating the status and or availability of benefits for said business, government, educational institution, or non-profit as:
at least one of said benefit providers intends to or actually does modify the existing benefit qualification parameters for one or more of said providers benefits; and or
at least one of said benefit providers intends to or actually does modify or eliminate an existing benefit; or offers one or more benefits not previously offered; and or
one or more business, government, educational institution, or non-profits applicable benefits offered by one or more benefit providers new to, or returning to, said system are added to said system.

252. The method of claim 251, further comprising the step of notifying in real time or later said business, government, educational institution, or non-profit upon said updating.

253. The method of claim 252, further comprising the step of selecting or electing when said business, government, educational institution, or non-profit receives said notifications.

254. The method of claim 250, further comprising the step of requiring said business, government, educational institution, or non-profit to update said business, government, educational institution, or non-profits data as a condition of said business, government, educational institution, or non-profit continuing to remain a system user.

255. The method of claim 247, further comprising the step of said business, government, educational institution, or non-profit and or at least one of said benefit providers to pay for said system access and use from at least one from the group of:
on a per benefit disclosed basis;
on a per benefit received basis;
on a per benefit utilized basis;

through said business, government, educational institution, or non-profits relinquishment of at least a portion of at least one of said benefits;
through the cash or cash equivalent payment of some part or percentage of the value of at least one of said benefits.

256. The method of claim 247, further comprising the step of receiving directly and or via one or more third party intermediaries monetary revenue and or other value from at least one benefit provider.

257. The method of claim 247, further comprising one or more of the steps of:
updating benefits data;
modifying benefits data;
removing benefits data;
adding new benefits data.

258. The method of claim 247, further comprising one or more of the steps of said message:
providing one or more of said benefits not applicable to business, government, educational institution, or non-profit;
providing one or more of said benefit providers not applicable to business, government, educational institution, or non-profit;
providing one or more of said benefit providers benefit application forms;
providing one or more of at least one of said benefit providers contact information;
providing a map for and or directions to one or more of said benefit providers.

259. The method of claim 247, further comprising at least one of the steps from the group of:
connecting said business, government, educational institution, or non-profit with at least one of said plurality of benefit providers;
said business, government, educational institution, or non-profit interacting with at least one of said benefit providers;
at least one of said benefit providers offering said benefits to said business, government, educational institution, or non-profit;

completing one or more application forms, when applicable, by said business, government, educational institution, or non-profit;

assisting said business, government, educational institution, or non-profit in the completing of one or more application forms;

transmitting at least one benefit approval for said business, government, educational institution, or non-profit by at least one of said benefit providers;

transmitting an acceptance of at least one of said benefits by said business, government, educational institution, or non-profit;

receiving at least one of said benefits by said business, government, educational institution, or non-profit;

utilizing at least one of said benefits by said business, government, educational institution, or non-profit.

260. The method of claim 257, further comprising the step of performing at least one of the listed steps in real or near real time.
261. The method of claim 247, further comprising the step of sharing said business, government, educational institution, or non-profits benefits and or benefits information with at least one other entity via said system.
262. The method of claim 247, further comprising the step of including in said message at least one benefit for which said business, government, educational institution, or non-profit:
may qualify for; and or
may not qualify for; and or
does qualify for; and or
does not qualify for.
263. The method of claim 247, wherein said message informs business, government, educational institution, or non-profit of at least one benefit contained within said memory without regards to at least some part of said business, government, educational institution, or non-profits data.

264. The method of claim 247, further comprising the step of one or more of said benefit providers submitting said benefit information and or said benefits directly into said system.

265. The method of claim 247, further comprising the step of at least one of said benefit information and or said benefits from at least one of said benefit providers is delivered directly into said system via at least one third party intermediary acting on behalf of at least one of said benefit providers.

266. The method of claim 247, wherein said available benefits varies according to:
the amount of said business, government, educational institution, or non-profits data; and or
the completeness of said business, government, educational institution, or non-profits
data.

267. The method of claim 247, further comprising the step of inputting at least some phantom
business, government, educational institution, or non-profits data; wherein said phantom data
does not belong to nor correspond to said business, government, educational institution, or
non-profits actual factual data.

268. The method of claim 247, wherein said business, government, educational institution, or
non-profits data includes business, government, educational institution, or non-profits
identification information.

269. A method comprising the steps of:
receiving benefit information;
receiving a benefit information request;
storing said benefit information request;
querying, via a data submission device, a central benefit information storage system to
determine if any benefits exist for said benefit information request;
benefit information requester receiving, via a data receiving device, some subset of said benefit
information;

said requester thereafter receiving, utilizing said stored request and via a data receiving device, at least one automatically generated updated subset of said benefit information.

270. Computer readable code stored on media for:

collecting and analyzing benefit data to determine applicable benefits, said code comprising a plurality of benefit modules, each capable of collecting data from benefit providers; revealing automatically and directly via a computer network said applicable benefits.

271. A distributed benefit information match mechanism conducted via a computer network comprising:

means for storing a plurality of benefit registrations;
means for receiving directly a benefit request which includes one or more benefit qualifying criteria from a benefit desiring seeker via said network;
means for resolving said benefit request against said benefit registrations to determine one or more matching said benefit registrations;
means for automatically providing benefit results directly to said benefit requesting seeker via said network.

272. A method of generating a benefit result list in real or substantially real time in response to a benefit match request from a seeker using a computer network, comprising:
maintaining at least one database including a plurality of benefit listings;
receiving a benefit match request from said seeker, said request including said seekers criteria;
identifying those of said benefit listings having criteria which generate a match with said match request;
generating automatically a message to inform directly said seeker via said computer network of those of said benefits which match said seekers criteria.

Evidence Appendix

Exhibit A: Two page Dialog/Business Wire/Gale Group HelpWorks Web Edition 2001 launch press release.

Exhibit B: Two page USPTO HelpWorks Web Edition trademark application.

Exhibit C: Four pages of GovBenefits/BenefitsCheckUp information.

Related Proceedings Appendix

None/Not Applicable